24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)					FOR SE OF	FORM 24/48	
IAME OF COMMITTEE (In Full)				FFC		ON NUMBER ▼	
Planned Parenthood Votes						OIT ITOMIBLE T	
				C	C00489799		
Check if X 24-hour report 48-hour report New report Amends report filed on							
Full Name of Payee			Da	te of Pub	lic Distribution	Dissemination	
Stones' Phones				10	/ D D /	2016	
Mailing Address 41-750 Rancho Las Palmas Dr #E-3				Amount			
	21.1	7. 0.1				40000.00	
City	State Zip Code CA 92270				12000.00 Transaction ID : B634584		
Rancho Mirage	92210			Date of Disbursement or Obligation			
Purpose of Expenditure Phone calls-Estimated costs		Category/ Type 003		10	29	2016	
Name of Federal Candidate		x Support	Office Sor	ught:	X House	District: 10	
Bennett, LuAnn, , ,		Oppose	Pre	sident	Senate	State: VA	
Calendar Year-To-Date Per Election for Office Sought		88473.13	Disbursen	nent For:	Primary	X General	
Fer Election for Office Sought	, , ,	66 11 6.16		Other (s	specify) 🕨		
Full Name of Payee Planned Parenthood Northern Californ	ia Action Fu	ınd	Da			/Dissemination	
Thatmed Farenthood Northern Gamen	14 / (01101111)	aria -		10 ^M	28	2016	
Mailing Address P.O. Box 1116			An	nount			
City	State	Zip Code				2488.29	
Concord	CA	94522			ID : B634539 bursement or (Obligation	
Purpose of Expenditure		Category/		M = M	/ D D /	Y	
Canvassing-Estimated costs		Type 007		10	28	2016	
Name of Federal Candidate		✗ Support	Office So	ught:	House	District:	
Clinton, Hillary, , ,		Oppose	x Pre	sident	Senate	State: US	
Calendar Year-To-Date			Disburser	nent For:	Primary	√ X General	
Per Election for Office Sought	, ,	3635805.45	2016	1	specify) -		
(a) SUBTOTAL of Itemized Independent Expenditures	S					14488.29	
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		. ▶				
(a) TOTAL Independent Expenditures							
(c) TOTAL Independent Expenditures			•		-		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Schifeling, Deirdre, , ,	ETT.		M = M	/ D		Y Y	
Signature	[Electron	ically Filed] Date	10	28	201	6	
-							